



Green Energy Program Grant Application
Delaware Energy Office
1203 College Park Drive, Suite 101, Dover, DE 19904
Phone: (302) 735 - 3480 & Fax (302) 739 - 1840

Photovoltaic

Residential
Commercial
Non-Profit

Applicant Information

Name / Company: Renewable Energy Relief Program Participant () Yes () No

Email: Energy Audit Attached () Yes () No

Daytime Phone: Evening Phone:

Installation Address:

City: State: Zip code:

Mailing Address:

City: State: Zip code:

Electric Utility: Last 12 Months: KWH usage

Rebate Designee: (If other than applicant)

Name / Company:

Email:

Daytime Phone: Evening Phone:

Mailing Address:

City: State: Zip code:

Contractor:

Name / Company: DE Business License #

Email:

Daytime Phone:

Mailing Address:

City: State: Zip code:

Licensed Installation Professional (Electrician, Plumber, HVAC Contractor)

Name: DE Business License #

Email: Professional License #

Daytime Phone: Professional License Issuing State:

Mailing Address:

City: State: Zip code:



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System Characteristics

Installation type: Check one	<input type="checkbox"/> New Construction	<input type="checkbox"/> Existing Construction	<input type="checkbox"/> PPA
System Type: Check one	<input type="checkbox"/> Utility Interconnected	<input type="checkbox"/> Utility Interconnected w/ battery	<input type="checkbox"/> Stand - Alone w/ battery
Installation type: Check one	<input type="checkbox"/> Rooftop	<input type="checkbox"/> Ground mount	<input type="checkbox"/> Tracking
Array Orientation:	degrees	Array Tilt:	degrees
Module Manufacturer:		Module Model #	
Module Power Rating:	(DC Watts at PTC)	Number of Modules:	
Total Array Output:	(Modules x Power Rating)	Only 50KW and smaller systems are eligible	
Inverter Manufacturer:		Inverter Model #	
Inverter Power Rating:	(AC Watts)	Number of Inverters:	
Inverter Efficiency:		Inverter Location:	
System Rated Output:	AC Watts (Total Array Output x Inverter Peak Efficiency)		
Estimated Annual Production (kwh):			

System Cost:

Material Cost:	Permits:
Labor Cost:	Other Fees:

Rebate Calculation: Grants may not exceed the Grant Cap

Residential, Non-Residential, PPA	Non-Profit
(1) First 5000 watts (w) x \$1.25/(w)	(1) First 5000 watts (w) x \$2.55/(w)
(2) Second 5000 (w) x \$0.75/(w)	(2) Second 5000 (w) x \$1.50/(w)
(3) 10,001 - 100,000 (w) x \$0.35/(w)	(3) 10,001 - 100,000 (w) x \$0.70/(w)
Total Request: (1) + (2) + (3)	Total Request: (1) + (2) + (3)

Declaration: I understand and agree that:

- 1) the information provided on this form is true and correct to the best of my knowledge
- 2) the above described system is intended to offset part or all of the applicants electricity needs at the installation site
- 3) the site of installation is located in the utility service territory as described on page 1 of the application
- 4) the State of Delaware and its agents provide no warranty for this system
- 5) all warranties are provided by the installing contractor and shown on the final invoice as 5 years parts and labor
- 6) the applicant has received a copy of this completed form
- 7) requests for PV funding are limited to systems 50KW and under. Splitting systems by meter or otherwise to remain under the 50KW limit is not acceptable for funding and may result in loss of grant.
- 8) completed grants may be queued pending availability of funding

Signatures

Purchaser	Contractor
Printed Name:	Printed Name:
Signature :	Signature: